

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

WATER WELL REPORT

State of Washington

IC Site ID: **AJC** Unique Well ID:
Start Card:
Water Right:

(1) OWNER: Name: **Ankeny**

Address:

(2) LOCATION OF WELL: Island: **Whidbey**

Township/Range-Section: **29N/03E-28M**

Parcel Number: **R32928-246-0701**

(2a) Well Address

PWS-ID: **AB0664**

Source: **1**

PWS-Name: **Ankeny Water System**

(3) PROPOSED USE: **Domestic**

(4) TYPE OF WORK: Owner's Well Number (if more than one):

Method:

(5) DIMENSIONS:

Diameter of Well: inches.

Drilled: **155** feet. Depth of Completed Well: **155** ft.

(6) CONSTRUCTION DETAILS:

Casing Installed: Diam. (in) from to (ft)

Screens: Type Zone Diam Slot from to (ft)

Surface seal:
Material: To depth: ft.

(7) PUMP:

Type:

Submersible

Horsepower: **2**

(8) WATER LEVELS: 1 Land-surface elevation (MSL): **120.8** ft.

AvgWL Elevation: **-22** Calc'd Elev: **103** ft.

Earliest Level: **125.00** ft. below toc Date: **10/31/1996**

Lastest Level: **125.00** ft. below toc Date: **10/31/1996**

Average Level: **125.00** ft. below toc Average Date: **10/31/1996**

(9) WELL TESTS:

Type	Yield	Drawdown	After	Date
Pump	10 gpm	0.5 feet	4.4 hours	10/31/1996

(10) WELL LOG DESCRIPTION:

Material

From
BGS

From
MSL

Thick

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Work Completed:

TD Elev: **-52** ft. MSL

WELL CONSTRUCTOR CERTIFICATION:

Name:

Address:

Contractor's
Registration Number:

Remarks: **Information from 2-Party System Application. Well date ~1968.
JMT 10-6-00**

Max CL: **10**

Max NO3: **0.25**

Generated by the Island County

Hydrogeologic Database: **3/23/2007**

Disclaimer: Data presented has been collected from a variety of sources.
Island County makes no guarantee as to the validity or accuracy of this data.
Please report any errors to the Island County Hydrogeologist



WASHINGTON STATE
DEPARTMENT OF
ECOLOGY

Well Tagging Form

Unique Well Tag No: APH017

RECORD VERIFICATION (check ☒ one)

- ☐ Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you)
- ☐ Verification inconclusive
- ☒ Well Report not available

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WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT

Name: Ankeny Water System

Street Address: _____

City: Clinton

State: WA

WELL LOCATION IF DIFFERENT FROM WELL REPORT

Well Address: 3275 Hillberg Ln/R32928-246-0701

City: Clinton

County: Island

T. 29N

R. 03E W.M.

Sec. 28

NW 1/4 of the SW 1/4

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Latitude: 47 58.20091

Longitude: 122 26.18707

Elevation at land surface 121 feet meters (circle one)

Additional Information, if available:

☐ Location marked on topographic map (please attach)

☐ Location marked on air photo (please attach)

- ☒ GPS
- ☐ Topographic Map
- ☐ Survey
- ☐ Computer generated

- ☐ Digital Altimeter
- ☐ Topographic Map
- ☒ Other: Computer Generated from
DEM and GPS XY Coordinates

Tag placed and well
GPS'd by:



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WELL CHARACTERISTICS

Physical Description of well (size of casing, type of well, housing, etc.)

Pumphouse Is In Yellow Metal Garage Behind Property. Wellhead Is Under Bucket On Right

Location of Well Identification Tag:

Was supplemental tag needed for easy of identifying well?

☐

Yes

☒

No

If yes, where was tag placed?

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

SECTION: 29N/03E-28

COMMENTS:

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Water Right #

Date Issued:

Circle One:

Application

Permit

Certificate

Claim

Exempt